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Substitute for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>				Complete if Known	
				Application Number	09/891,380
				Filing Date	06-27-01
				First Named Inventor	Karin Axelsson
				Art Unit	2424
				Examiner Name	Usha Raman
				Attorney Docket Number	P2927US00
Sheet	1	of	2		

[illegible][illegible]

Examiner Signature		Date Considered	
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Substitute for form 1449B/PTO <div style="text-align: center;"> INFORMATION DISCLOSURE STATEMENT BY APPLICANT </div> <i>(Use as many sheets as necessary)</i>				Complete if Known	
				Application Number	09/891,380
				Filing Date	06-27-01
				First Named Inventor	Karin Axelsson
				Group Art Unit	2424
				Examiner Name	Usha Raman
Sheet	2	of	2	Attorney Docket Number	P2927US00

[illegible]

Examiner Signature		Date Considered	
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1. Applicants unique citation designation number. (optional) 2. Applicant is to place a check mark here if English language Translation is attached.

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